Female foeticide/infanticide

2079. SHRI RAJNITI PRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the steps taken by Government to stop female foeticide and infanticide particularly in the northern States of the country;

(b) whether it is a fact that male-female ratio in certain northern States is alarmingly unbalanced and as a result there is spurt in the cases of sex related crimes; and

(c) the steps being contemplated by Government to disseminate the awareness among the common people about the alarming situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DINESH TRIVEDI): (a) to (c) To combat the practice of female foeticide and infanticide in the country through misuse of technology, done surreptitiously with the active connivance of the service providers and the persons seeking such service, the Pre-natal Diagnostic Techniques (Regulation and Prevention of Misuse) Act was enacted on September 20, 1994 by the Government of India.

The Act was amended in 2003 to improve regulation of technology capable of sex selection and to arrest the decline in the child sex ratio as revealed by the Census 2001 and with effect from 14.02.2003, due to the amendments, the Act is known as the Pre-conception and Pre-natal Diagnostic Techniques (Prohibition of sex Selection) Act, 1994.

The main purpose of enacting the PC and PNDT (prohibition of Sex Selection) Act, 1994 has been to:

(i) Ban the use of sex selection techniques before or after conception

(ii) Prevent the misuse of pre-natal diagnostic techniques for sex selective abortions

(iii) Regulate such techniques

Stringent punishments have been prescribed under the Act for using pre-conception and pre-natal diagnostic techniques to illegally determine the sex of the foetus. The appropriate Authorities at the District and State levels are empowered to search, seize and seal the machines, equipments and records of the violators. The sale of certain diagnostic equipment is restricted only to the bodies registered under the Act.

The Government has also taken various steps to support implementation of the legislation, including through constitution of a National Inspection and Monitoring Committee (NIMC), Central and State Supervisory Boards, capacity building of implementing agencies, including the judiciary and public prosecutors and community awareness generation through PRIs and community health workers such as Auxiliary Nursing Midwives (ANMs) and Accredited Social Health Activists (ASHAs).

The Census 2001 figures reveal that the child sex ration for the age group of 0-6 years is comparatively lower in Punjab (798), Haryana (819), Chandigarh (845), Delhi (868), Gujarat (883), Himachal Pradesh (896) and Rajasthan (909) as compared to the national average of 927 girls per thousand boys.

Though there is no established casual relationship between adverse sex ratio and spurt in cases of sex related crimes, this could be one of the factors resulting in some forms of violence against women.

Issue of substitute medicines by CGHS dispensary

2080. SHRI KAMAL AKHTAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether medicines prescribed by the Specialists and Government Hospitals with remarks on the prescription - no substitute to the beneficiaries are being issued alternative medicines by the Central Government Health Scheme (CGHS) Dispensaries, particularly Aram Bagh, Chitra Gupta Road, Sector - 12, R.K. Puram dispensaries;

(b) if so, the details thereof;

(c) whether this is permitted under rules;

(d) if so, the details thereof; and

(e) if not, the action taken against the doctors of the dispensaries who have issued substitute medicines to the beneficiaries?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (e) As a matter of policy, on prescription specialists, the CGHS dispensaries are required to supply to beneficiaries, as far as possible, medicines of same formulation and therapeutic valve available with them and is not treated as "substitute". If such medicines are not available then only these are indented for procurement from Authorised Local Chemist or through the Medical Store Depot.

Shortage of anti-rabies vaccine

2081. SHRIMATI BRINDA KARAT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is a shortage of anti-rabies vaccine;

(b) whether it is also a fact that production of anti-rabies vaccine by PSUs was suspended by the Drugs Controller General of India (DCGI);

(c) whether after the stoppage of production by the PSUs, the private pharmaceutical